Chapter 4

Results

4.1. Introduction

This section provides a storied account of respective participants' experiences as reflected in their own words. The primary aims and questions of this project provide a basic structure to how these stories are thematically related as research results. The four questions which guide this discussion focus on participants' perceptions of being a traditional healer, working in a hospital environment as a traditional healer, perceptions of the relationship between work and traditional healing and others' perceptions of the traditional healer working in a hospital.

4.2. Naledi's Story

4.2.1. Perceptions of being a traditional healer

In telling the story of becoming a traditional healer, Naledi states how she knew from childhood that she was going to be a Sangoma but didn't believe in it because she didn't know nor understand it. Being unwilling, she considered traditional healing as something strange from what she was doing because she wanted to study and be professionally qualified: *" I actually thought I would be like CEO somewhere, in a very big company, in an engineering company because things were going smooth for me with my studies, I was doing quite well, but there was this thing that was like pulling me behind. Things were not happening like I want them but they were happening in a way".*

Naledi states that she wanted to work like an ordinary person who goes to work and comes back home without having additional traditional healing duties to perform: "*I didn't believe in it because I didn't know it and I didn't understand it…so I didn't even want to entertain it because that was something strange from what I want and what I am doing…because, from my point of view, what I wanted was to study and becoming a professional somebody who worked like an ordinary person, do my job, go to work, come back home…not doing this healing thing* ".

Naledi recalls how after several years of increased misfortune, problematic social relations and significant weight loss, she started feeling that something was taking away

and spoiling everything of value to her. She then recalls a period of telling others' future and providing answers to their problems, accompanied by her disbelief in their confirmation of her divination. The calling grew stronger as she started dreaming of having her *bones* (traditional healer's tools) and she submitted herself for initiation motivated by a strong sense of danger (personal harm/death) and increased problematic interpersonal relationships, believing that she would die if she did not submit herself for traditional initiation.

To confirm the calling, Naledi went to two different diviners for a 'bone reading': *"Something told me to go to this prophet who said: "because you don't want to take this, and it's a calling, you will end up dying". I just thought of my children and said "now my children are going to lose me because I don't want to go through this". That's when I decided that I must go* ". Both diviners instructed her to submit herself for initiation into traditional healing. Upon receiving this ancestral confirmation, she immediately availed herself for initiation, starting under a different traditional healer (*Gobela* or teacher) to where she completed the process. Upon submitting herself for initiation, she found that the person who was teaching her was questionable and was instructed by the ancestors to leave, thereby completing her initiation under instruction of a healer and his wife known by her family since childhood.

The process of submitting herself for initiation was marked by concerns over losing her work and the safety of her family, as she is a single parent and sole provider to her mother and her three children. Naledi tells of praying and bargaining with the ancestors in allowing her to keep her work if she submitted herself for initiation. Following completion of initiation Naledi states that she gained weight and received guidance and good fortune from her ancestors: *"I'm also a breadwinner, I must make sure…my mom's not working, I must make sure food is on the table, my mom is okay, and everything is fine in the house. So that's when I decided not to leave my job will be wise because I also need financial background"*

In her words "I really love my ancestors, they are good to me", Naledi expresses devotion toward her ancestors and states that they help her achieve some of her dreams, though not all. She recalls the start of her initiation as a confusing time where she did not understand why someone else in the family was not rather called into

traditional training and service. In relating her resistance to this experience, she emphasises a need for acceptance of ancestral calling as something unavoidable in order to experience peace again: *"this is what I am, and you start being proud of what you are, and the ancestors will do wonders, they will make you feel good about yourself*". Through initiatory training, she acquired traditional craft and divinatory skills such as bone-throwing, stating that it is the ancestral spirit which works through her. Naledi goes on to say that it is personally satisfying to receive appreciative confirmation of effective treatment or divination from clients, perceiving this as a sign of approval from the ancestors.

Naledi says that she has changed due to initiation: *"I have changed since those days. I used to fight a lot, now I am a straightforward person, I don't like pretending".* She also expresses a desire to continue communication and perhaps reconcile with the father of her youngest child, who still contacts her after the initiation. In some contrast to apparent compliance on his inquiring about the welfare of their son, she reflects a lack of trust in this relationship, stating that she perceives the lack of need for intimacy as peaceful solitude which is misunderstood by others in her community. Traditional perceptions of marriage accompany her understanding of retaining the power to heal as she views her body as a spiritual force which must be maintained in a 'pure' state in order for the spirits to work through her.

4.2.3. Perceptions of working in a hospital environment

Naledi relates to her work as a medical technician as an expression of a childhood desire to qualify herself professionally. At school she achieved academically and was awarded a bursary, obtaining a tertiary qualification in Gauteng.

She believes that the ancestors prevented her from going further in this field and becoming a corporate executive as she wanted, so as to maintain her interest and willingness in subsequent traditional initiation and practice. Following application and selection, ancestral approval was confirmed through a dream which preceded her current working appointment.

For Naledi the work she is doing in the hospital environment has been accompanied by a growing interest in the field of nursing. This is a newer interest than previous learning

and current work, attributed to ancestral intervention following completion of initiation as a traditional healer.

She perceives continued learning as an opportunity to further herself and ensure safety for her family, particularly her children; stating that satisfaction is determined by the ancestors who display their kindness in providing for some of her desires and disallowing others. In addition to this, initiation is an expensive process for which she had to pay herself. Although Naledi feels she has to make some money in return for this cost, she remains willing to treat the poor when they are sick or in need; therefore she cannot rely on the inconsistent income of full-time traditional healing practice. *Naledi: " I cant take my spiritual, my being a Sangoma, full time as a good thing because, what if people doesn't come, not because they doesn't come but because they can't afford to pay, or I'm just gonna sit in my umdumba and say: "well, people are not affording".*

Naledi enjoys working in a hospital environment where she has been working for six years. It makes her happy to help the doctors and other staff members in seeing to the wellbeing of the patient as her primary concern. By doing this work, Naledi feels that she can make a difference in a person's life through her presence in the theatre at times when her skills are required during operations: *": for me, working in a hospital environment…I think its good, even though, though I am not a doctor, but helping, the doctor or other staff members…the only person we are worried about is the patient, and the wellbeing of the patient, which means, my being there, can make a difference in a person's life, it might save a person in a way… and everything is okay. I thought, before I started working, I thought how am I gonna cope? But I'm not scared, I was trained properly"*. Describing in detail how daily life at work presents typically stressful situations where pressure is increased by time constraints and unconscious patients in the presence of impatient doctors, she emphasises the importance of her role in assisting the doctor and takes pride in using her skills to ensure the safety of the patient: *"I think what makes me to enjoy my work, is, I'm a professional, I'm good in to do problem solving, I'm a problem solver naturally so it makes it quite, easy, I just manage to fix, you know, and I know where the problem is, I know where to go, I know exactly where to check and that's what makes me to enjoy my job you know, and working with the patient. I'm also saving their lives, its very important. I am proud of that, really".*

In relating earlier experiences of working in the hospital setting, Naledi recalls doubts and a feeling of uncertainty at the idea of coping with this new environment but states that she relied on her formal training prior to commencing at this hospital, saying: *"I was never scared at all, its just like that, I was trained properly".*

A typical day at work lasts between eight to ten hours, Naledi regularly has to work overtime due to staff shortages. She speaks of confusion following an offer of increased payment in her expressing a desire to leave the field of her current employment in lieu of further studies in nursing, stating that there is a lack of skilled persons in her specific line of work, whereas there are more nurses. In attempting to resolve this conflict, Naledi states that she needs the ancestors to show her what they want her to do. She wants to leave but also takes pride in awareness of her work role as a newly developing area in the hospital environment with limited availability of appropriately trained staff who shares concern for their patient.

Whilst retaining a largely positive regard to work, Naledi mentions some aspects of working in the hospital as unpleasant, such as the doctor shouting when things go wrong and staff not being properly qualified to deal with a problem. She notes that she is able to calm such situations by using her skills to make a difference. Another aspect of work which she considers to be unpleasant concerns extended working hours.

What Naledi enjoys most about her work is the fact that she is properly trained and able to apply her skills. She states that she is good at problem solving and confidently relates to her work-role. Naledi enjoys interacting with patients and proudly relates to the significance of her work, stating that her role of helping the doctors see to the patient: *"is very important work"*.

There are some aspects about working in a hospital environment which fit for her with being a traditional healer. Naledi finds that she can ease patients' anxiety in talking to them, and is identified by traditional attire which signifies her as a Nguni based traditional healer: *" the similarity is the patients they chat to us and you find that others are not coping, others are worried what's going to happen in there…so, I sometimes come in asking, I come and greet them, asking: "how are you feeling", and others will say, I'm so worried, and like, it just happens, things that I tell them, it works, you know,*

even when they ask, sometimes they ask: "where's that lady?", "which lady?", "the one who was here", they don't even know who the person is, and others will like, identify me with my beads: "the one with the white and red".

As a traditional healer working in a western profession Naledi does not find her western working environment to be strange as she was exposed to this as a child growing up in Soweto, influenced by an urban lifestyle, long before she experienced the calling into traditional healing. She contrasts this with a rural lifestyle which does not afford the experience of seeing lots of cars or going to a hospital when you are sick, which she did as a child: ***"****To me there is no difference, we were brought up with a western…those are things that we were exposed to. To me it doesn't make a difference, because it was there even before I was a traditional healer".*

When relating aspects of work she feels have been good for her, Naledi firstly expresses her delight in applying the skills she had acquired through tertiary education, in addition to the fact that the inclusion of her particular type if qualification in hospital environments is a new development, which makes her feel unique and proud of her work.

In relating to aspects of work which are difficult or less pleasant, Naledi also includes the period of traditional initiation during which she maintained her current occupation. She remembers this period as marked by continuous work and a lack of sleep where she had to do her work in the hospital by day and her traditional training and treatment of patients after work, followed by further traditional instruction and a short period of sleep before commencing with daily duties of cleaning her *Gobela's* home and talking to the ancestors before leaving for work again in the morning. She emphasises the need to keep her work happy by working hard and pleasing the ancestors by diligent performance of traditional duties on returning to the home of her instructor during initiation, which also functions as a precondition for her retaining her work and income.

4.2.4. Perceptions of the relationship between work and traditional healing

In explaining her reasons for working in a hospital setting instead of full time traditional healing practice, Naledi states that contemporary life demands are different from before as the need for money to survive and raise children are not always comprehensively taken care of by the ancestors alone. She repeats a primary concern of her children's

educational and developmental needs, whilst also taking care of her elderly, unemployed mother who minds her children during the day while she is at work. Naledi emphasises the responsibilities of her role as breadwinner and therefore decided to retain her work whilst completing initiation as a traditional healer.

In addition to working for the sake of financial gains, Naledi also says that she wants to continue learning by studying nursing but that access to this is largely dependent on ancestral approval and continued traditional practice. In relating to ancestral approval she says that her ancestors did not make her suffer like others' do, instead they gave her a chance to continue working.

In considering what it would be like if she had the opportunity to practice as a full time traditional healer instead of working in a hospital, Naledi states that she would retain both her professional work role and continue to perform her duties as a traditional healer. This decision is primarily motivated by a need for money and the lack of continuous patients who can afford to pay for her services as a traditional healer. She states that the need for payment in traditional healing arises out of the danger in working with malign spiritual forces which afflict some patients and may bring harm to the traditional healer. Naledi emphasises that a sick person must be treated even if they lack the money to pay for her medicine: *"even if someone cannot pay, they are sick, I must help them".*

4.2.5. How others view the traditional healer

In relating her experiences of working in a hospital environment, Naledi states that she feels better understood by white people at work, that they understand what she is doing and that she cannot run away from her calling. She contrasts this with a feigned ignorance of other African colleagues with respect to the cultural exposure and availability of traditional healing in the African community, stating that they are more aware of what she does than what they pretend, subsequently avoiding her for fear of exposure and guilt: *" At work the white people understand me better…they understand its like a calling you know, a calling is a calling - you never run away from it. The others, they know, they understand it but they pretend not to".* When able to, she does attend to colleagues who ask for her help as a healer and diviner: *"There are people who I can trust. Few would come to me but at work they ask me what to do and we know what to*

do so we help them". Stating that although there are people at work she can trust, she does not like to rely on others who can become duplicitous or inauthentic in matters relating to traditional healing, confusing it with witchcraft: *" Being a healer, people still confuse it, I think they think that if a person who can heal also at the same time can do evil, or do, witchcraft, because the other one will come up and say: "I think I am having a problem, I think you must give me the muti to keep someone away".*

In relating the perceptions of others at work, Naledi recalls an incident when she started of a doctor who stated that as a scientist he did not believe in the effectiveness of traditional healing but now inquires how she is and has a different attitude and is interested in what she does as a traditional healer: *"I remember, in the beginning, there was a doctor once, when I started working there… who said that he is a scientist and that he does not believe in this stuff but now he comes to me and talks about it and is very different, even interested in what I do and how I am".* Some still confuse traditional healing with witchcraft in that they ask her for muti to get rid of unwanted people in their life. She expresses a strong disapproval of this and the association with witchcraft or evil in the traditional healing practice and divination that she performs as she submitted herself for initiation in traditional fashion in order to help people in the correct manner. Naledi believes that she will lose her power to heal if she were to provide such muti and retains a sense of value in her knowledge of traditional healing in spite of being misunderstood by some.

4.3. Feziwe's Story

4.3.1. Perceptions of being a traditional healer

On commencing the first interview, Feziwe expressed her wish to communicate in her mother tongue, isiZulu, as she is known to do at work and otherwise when communicating with the ancestors. As the interviewer was unable to speak or understand, Feziwe's daughter translated these parts into English during the interview.

In relating the story of becoming a traditional healer, Feziwe recalled becoming ill at the age of seven. At this stage she would sleep and dream of being a Sangoma but this was met by an unsupportive family environment marked by the absence of her father who left when she was a child. This was followed by hearing voices which were calling her, particularly that of a grandfather, showing her a river of water as symbolic of her calling

to initiation. Upon seeing the water she would grow scared as she did not know where to go for training and felt confused as a child whose education was interrupted by chronic unspecific illness and worms. She stresses how she did not resist upon receiving confirmation of her calling into traditional initiation as this resonated strongly with the memory of her childhood dreams and experiences of traditional healers.

This continued to when Feziwe recalled a period of chronic unspecific physical pain, which she interpreted as a sign of ancestral calling into traditional initiation. At the age of twenty she experienced more unspecific illnesses and asthmatic symptoms. It was during the years from twenty to twenty four that Feziwe interpreted her symptoms of illness as ancestral calling and sought the divinatory advice of a traditional healer who then confirmed this calling through a bone-throwing ritual. She recalled earlier childhood dreams about becoming a traditional healer and thus willingly submitted herself for initiation.

She understands her calling into traditional healing to be inspired by her grandmother who was also a traditional healer. She recalls that in 1999, for one year, when practicing full time traditional healing, she was happy and felt that her life was improving. This was followed by a period of searching for and reconciling with her estranged father in Mozambique; who left the family when she was a child and whom her mother had told her must be dead. Upon locating her father, she tells of attaining approval for her desire to be a traditional healer from her mother, who then stated that she tried to avoid this fate for her child as the training and lifestyle of a traditional healer is demanding. On reconciling with her father, she also received reassurance in his confirmation of the belief that she must be a traditional healer. She feels that she was always different from other children and believes that chronic childhood illnesses were sent from the ancestors in preparation for her later calling.

The process of finding a teacher and entering into initiatory training was not congruent with her willingness to do so and was marked by a lack of support from her mother, who was ignorant and never gave her much attention when she was sick. In some contrast to this, her sister was more supportive and took her to a traditional healer more than once so that she could be treated and receive confirmation of her calling. Feziwe also remembers the time preceding her initiation as one marked by difficulties and

interpersonal conflict at work. She states that although she was happy to have a job, she did not like her work and largely attributes this to the belief that the ancestors want her to be a full time Sangoma. She states that she dreamt of her *Gobela*, or teacher, which then precipitated her decision to pack her things and go to where this teacher lived. Upon arrival she then found this teacher in a house just like the one she had dreamt of previously and commenced her training. Although completed to the last ceremony, she does not feel this training is finished until she has spent some time with her father in his place of birth.

On starting initiation, the first and most obvious thing that changed for Feziwe was her attire, particularly the red and white beads around her wrists and neck, which indicates that she is a traditional healer within Nguni culture. Another aspect of marked change was that she had moved and was residing in her teacher's house for the duration of her initiation. This period of initiation is ancestrally determined and may differ for respective initiates. The period of initiation was a demanding one in that she still maintained her work at the hospital throughout this period. As with Naledi, Feziwe speaks of long working hours, followed by one to three hours of sleep and waking early to perform traditional duties and receive instruction prior to going to work in the morning.

Feziwe is a diviner of Nguni tradition who, unusually, does not use bone-throwing techniques but relies on dreams for ancestral instruction and primarily divines in a clairvoyant fashion for clients who enquire in person or on the telephone. In relating her ancestral gift, she emphasises the need for money in order to journey further in lieu of completing her training. She believes that if she does not go, the ancestors will think she does not want to perform traditional duties and will bring illness and misfortune upon her. She also speaks of younger *thwasa* students who have expressed the wish to train under her and have urged her to complete her process, indicating that she would take them in if she were in a better financial position and had returned from her father. Feziwe says that she believes she is going to be famous and wants to be on television where she will be able to inform the public of indigenous traditional healing practices.

"Me being a Sangoma, helps the community. There are so many sicknesses that you find that sometimes they don't really need a doctor, sometimes somebody's just sick because of, he or she has not been following her tradition things, or performing her

duties towards the ancestors". In response to exploring the role of the traditional healer in the changing community of South Africa, Feziwe believes that her being a Sangoma helps the community. As a traditional healer, she believes that there are types of illness that do not require western medical treatment, particularly becoming ill due to ancestral calling into traditional initiation, for which the only cure is training and practice. Feziwe works with all her ancestors in uncritical regard for her responsibilities toward them, performing traditional rituals and ceremonies in honour of them.

4.3.2. Perceptions of working in a hospital environment

Feziwe states that she does not like her work at the hospital and gives, as a primary reason, the desire to have her umdumba, or medicine room, from which to practice full time traditional healing at her home in Soweto. As such, the main reason she provides for working is a need for money to complete her training elsewhere before she can return to establish her umdumba. As a single mother to four children, financial income is an imperative which does not allow for easy access and uncomplicated opportunity in completion of her initiation process.

Prior to working in the hospital, Feziwe worked at an old age home, cleaning cottages and assisting elderly residents. Following retrenchment, she applied to and was employed by the current employment company which placed her in the hospital environment as she had similar experience at her previous place of work.

Here, Feziwe recalls how she wanted to become a doctor, and also a nursing sister, in standard six. What attracted her to this career was the white overcoat which the doctor wears during ward rounds and in the operation theatre. She emphasises the desire to work alongside doctors in practicing her traditional healing whilst they apply western biomedicine. Despite her lack of formal education, she displays confidence in believing that she can contribute as a member of a team of medical staff in treating patients and refers to experiences of her own at a local hospital of communicating with doctors and patients who received her diagnoses and suggested treatment positively, inviting her to come and work with them in the future, being interested in what she has to say: ***"****Because I'm like a doctor, I like to help the people. The doctor they do their work, and I do the traditional healing, because there is the other sickness, they don't want a doctor, they want me. You see, we work together, and its happening****".*** She enjoys the

challenge of exposure to dangerous things in theatre as she is not afraid of anything and has been made strong by drinking the sacrificial goat's blood during her final initiatory ritual. Feziwe spoke of this exposure in an animated manner, repeatedly stating: *"I'm not scared for anything".*

Feziwe identifies the hard physical labour of a cleaner's work as the most aversive aspect of her current position in the hospital, as opposed to not working as hard in traditional healing where she finds it easy to follows the instruction of her ancestors. In addition, she strongly emphasises the belief that her current employment does not carry ancestral approval and repeatedly expresses the desire to practice full time traditional healing, given enough income and having completed her final initiatory rites in honour of the ancestors of her now reconciled father. She feels that her formal employment does not allow her to express her desire to practice traditional healing, particularly when she is unable to go to work because her ancestors instruct her to stay at home and communicate with them.

4.3.3. Perceptions of the relationship between work and traditional healing

A primary motivating factor for continued work, in spite of her dislike of this position, is the care and welfare of her four children. Financial hardship has seen to an extended and ongoing initiatory process which she intensely desires to complete in order to take the official position of full time traditional healer, believing that she will be blessed by the ancestors in doing so.

Feziwe expresses a desire to help people and sees her role at work as a changing one where she assumes the role of a nurse at times, as she does not like pain and wants to take it away for patients: *"I like to help the people, like a doctor. I'm like a nurse sometimes".* On occasion she approaches patients in an attempt to intervene or provide advice as a traditional healer, stating that this is not always well received and her knowledge not as highly regarded at the modernised institute where she works, as opposed to the local hospital where she lives and where medical staff are more open to integration. Feziwe adds that she finds it easier to tell a nurse about her understanding of a particular patient's condition, than a doctor, who she believes will respond negatively motivated by a fear of losing their patients and income.

Some perceptions of the relationship between work and traditional healing are reflected in Feziwe's identification of more positive aspects of her work. In performing her work duties in the operation theatre she sees surgical procedures and is exposed to experiences that would otherwise not be the case in practicing full time traditional healing alone. She states that she enjoys working in the theatres during these procedures as she can see and inquire about what the doctors are doing, and so learn more. She also enjoys being identified as the 'Sangoma' by the doctors and nurses at work. ***"****I like the operationing, I like to see what they are doing. I ask: "what's happening?" and then they tell me and say "hey! Sangoma!****"***

"*They will show me everything, I want to know what is happening in theatre, they teach me the lot of things".* In addition to seeing what happens in theatre, Feziwe enjoys learning and having knowledge of cleaning the theatres in a particular systematic manner whilst wearing protective garments; mask, goggles, boots and gloves to prevent infection and disease found in the blood and body tissue she comes into contact with: "*We must clean around the patient also, you see everything. I must clean the blood and the pieces of meat, and bones when it's an accident. We've got the protective; just wear gowns, mask, goggles, boots, gloves. You don't get sick if you protect yourself"*. What Feziwe enjoys most about her work is the feeling of being like a doctor who helps people, explaining that she wants to do her traditional healing as a member of a team working with doctors and believes that this opportunity is available in her life now.

4.3.4. How others view the traditional healer

In relating her experiences of other people at work, Feziwe states that they treat her differently and want to know what she does. She states that many people ask her questions to which she divines, telling them what will happen in their future. A limited number of people who work with Feziwe have expressed a deeper interest in the process of her initiation and her identity as a traditional healer, which she sees as becoming what she is. *"They treat me differently. They ask me questions, sometimes, I see visions, before you come to me and ask me, and then I will come to you and tell you what's going to happen, because I had that vision …it depends, there is only one or two problems, just a couple of people at work, they sometimes wonder, like, how did it happen that I had to become what I am".*

Feziwe has moved residence in the last year and says that more people who knew her as a traditional healer used to support her in the previous neighbourhood. Although not in full time practice, Feziwe says that she is always willing to help those who are ill as refusal to do so may be misinterpreted by the ancestors as unwillingness to follow their calling: *"Because if they want they see you being relaxed, you are going to start again being sick, you see".*

"The doctors and the nurses, they were all right to me because they know… they call me, the Sangoma, because they know how it is happening, you see…they don't mind my traditional some of them…they like it…especially the doctors, they know that I am a Sangoma, even…yes…sometimes they clap their hand, they want me to do the dancing". At work, Feziwe feels understood by some people in that they allow her to *'khuluma'*, or talk to her ancestors whenever she needs to, being less communicative with others at work during these times. If she feels depressed, she will sing to herself, talking to the ancestors, and some colleagues will start clapping their hands, urging her to dance and in doing so lifts her spirit such that she feels able to spontaneously divine for them. Following these episodes, she returns to her work duties. She believes that some of her colleagues are also suffering from 'ancestral illness' in failing to respond to their calling. On sharing her thoughts with them, they urge her to silence for fear of others hearing or enduring the arduous training of initiation.

Whilst some colleagues are supportive or curiously interested in her traditional healing, others are resistant to the idea of a Sangoma which they associate with witchcraft and harmful potions, *muti.* Those who support her are colleagues who work more closely with her and have known her prior to and during the process of initiation, encouraging her to practice her traditional healing at home, to which she responds in affirmation that she is also a doctor: *" Our culture, they don't like a Sangoma because they know that you use muti, and then they think you are going to be a witch. They just confuse you ".*

4.4. Tumi's Story

4.4.1. Perceptions of being a traditional healer

For Tumi, reception of her calling was less complicated as she knew from childhood that her grandmother had refused this office due to strong Christian beliefs. She believes her calling is an inheritance which was passed onto her at the time of her grandmother's

death around fifteen years ago, at which stage she was twenty years old. Orphaned at a young age, she was mourning the loss of the grandmother who had raised her and tells of the ancestors bringing her comfort and encouraging her as a school girl to continue with her education in lieu of later service in their calling. Thus she carried on learning and obtained a qualification in nursing.

Tumi relates an event of attending a traditional initiation ceremony and going into a trance during a particular dance and drumming session, seeing visions which indicated that she was being called into traditional initiation to become a healer. Subsequently, Tumi had a dream of her teacher and immediately followed the instructions of the dream, leading her directly to the home of her teacher. On arrival, she found confirmation in her calling as the same person she dreamt of was there. As a *thwasa* student, she remained there for the duration of her initiation. She now resides in this same house, partnering her Gobela in learning and practicing traditional healing whilst working as a nursing sister every alternate week.

"It's changed a lot, before I was wild, cheeky, I was not understanding these other people, I was just trouble, enemies, I used to fight a lot. Now, many friends now, much better" Tumi says that her life has changed a lot since before initiation, when she was 'wild' and her life marked by interpersonal and social conflict, accompanied by feelings of not being understood by her family, upon receiving her calling at first. This changed when they saw her living where she does and wearing the traditional healer's attire as she was now a practicing traditional healer. In contrast to this she now has many friends and her previously unstructured lifestyle has now been replaced by regular ancestral communication integrated into her daily routine of preparing for and performing the important work of delivering babies at the hospital. *"I'm delivering the babies, its very important work. It's different being a traditional healer".*

Tumi continued with her work as a nurse whilst undergoing initiation and believes that the ancestors assist her in ensuring that all the babies which she assists in delivering are born alive and there are no complications during the birth: *"Every time I go to work I must patla so my ancestors can help me deliver those babies"*. She also practices as a traditional healer in her community and uses indigenous herbal based treatments for illness and divination by bone-throwing as taught by her Gobela. In addition to being

able to treat patients, Tumi enjoys being easily identified as a traditional healer in wearing her attire, particularly as it evokes a response of caution from others who become aware of the protective powers of the ancestors who look after her: *"The people they respect you, because if you are a Sangoma, wherever you are walking, people are afraid of you, they know the ancestors will look after you"*.

Tumi: "I am Sangoma, Inyanga, both. I can read the bones. I also have the vision and the dreams. I deal with the mutis and I do digging". Tumi is a diviner who also uses herbal muti for treatment. She proudly identifies herself as an Indau member within the more powerful Mandau tradition, which is a Shangaan-related form of traditional healing practice in which the Indau practitioner becomes possessed with the ancestral spirit who wishes to communicate through them. In gathering fresh muti for the month ahead, she goes on journeys to dig for medicine at least one week a month with her teacher.

4.4.2. Perceptions of working in a hospital environment

Tumi is a nurse who works in a labour ward at a local maternity clinic, delivering babies during a typical twelve hour night shift. This is a rotating shift regimen which changes to twelve hour day shifts after three months. For the past decade she has been working as a nurse since completing her studies in nursing. This includes training in community nursing, midwifery and psychiatric nursing.

In motivating her career choice, Tumi says she had always dreamt of becoming a nurse or a doctor and likes nursing as she finds it compatible with traditional healing practices and rites she instructs mothers of new born babies to perform. She feels that her work of bringing people into life is encouraging and different for her to traditional healing as she can instruct patients on what to do and they will listen to her both as nurse and traditional healer. *"I like nurses. That was my dream, that if I become old, I must become a nurse, or a doctor, it goes well with the healing. I use the traditional healing with the babies and I tell the people what they must do. They listen, they understand".*

Prior to working at the maternity clinic Tumi worked at a government hospital for five years, followed by working as a psychiatric nurse before transferring to the maternity clinic where she presently works as a midwife.

A typical day at the clinic starts by relieving day staff of their duties, reading updated reports in patient files and checking which patients are close to delivery. Patients are constantly examined to determine the stage of birth and Tumi works closely with the mother as well as her nursing assistant, in the absence of a doctor, assisting the mother in delivering without complications. Tumi confidently relates her ability to successfully facilitate delivery without the presence or assistance of a doctor, knowing exactly what to do at each stage of delivery and how to administer the correct medication afterwards. What she enjoys most about nursing is a feeling of pride at bringing babies into the world. *"I enjoy bringing babies into the world. I am so proud. If the nursing assistant is present, you must try and teach. Bringing babies into the world, it is very important".*

The workload may vary from one day to the next, depending on the amount of mothers in labour, and new patients admitted. Tumi says that it is when there are only a few births that she becomes bored and tired due to the long hours of night shift. In addition to long working hours, another aspect of work which contributes to stress is the fear of encountering complications during birth which may lead to the death of the mother or baby, exacerbated by the fact that she seldom receives feedback on the condition of a patient when transferred to the hospital due to such complications. Tumi's words illustrate her concern for the welfare of her patients and emphasise the importance of her work role: *"that is the time when we are being stressful. You want to know, how, what's happened to that patient, but, we are not getting the report, but you pray too, that there is no report going to say that the patient is dead".*

In working as a psychiatric nurse Tumi feels that she learnt a lot people: *"I've learnt a lot, through the education and the traditional. Nobody can tell me about the person",* drawing on her traditional understanding as well as western education in treating the mentally ill patient

4.4.3. Perceptions of the relationship between work and traditional healing

Instead of choosing to practice full time traditional healing at home, Tumi expresses an interest in advancing her career through further studies toward a nursing degree, stating that she enjoys her work, particularly at the maternity clinic: *" I still want to advance in nursing, I want to do the degree, advanced midwifery, I like that. I enjoy this work especially the maternity ward. I want more, advance, diploma, degree. I am enjoying*

this, working with the people, we see a lot of people in the clinic all day. I enjoy it very much".

She believes that being a traditional healer helps her to be better at nursing as she can communicate with and help members of her community who understand her role as healer at work as well as at home: ***"****It makes a difference for the other people. It helps a lot, by communicating with those people, different ideas, different things. In this case they understand"*. Another aspect which contributes to her understanding of the productive relationship between traditional healing and her work is the presence of five other colleagues who are also traditional healers at work, reflecting an integrated and receptive working environment where she feels a lack of jealousy and competitiveness in cooperation with others: *"We are helping each other. The other nurses they understand, the doctors also they understand".*

Her place of work is situated in the township, thus serving a largely African community where white people are less present historically with some contemporary increase. Thus the identity and role of the traditional healer is easily understood by members of the staff and community. Tumi feels she encounters less resistance when integrated in the workplace than at other more modern hospitals in the city: *"There are no white people, it is only for the community. I am a community nurse".*

Tumi identifies an important role for the traditional healer in her work of nursing and wants to continue with her training. She sees HIV/AIDS as an arena where the traditional healer plays an important role, together with bio-medical health professionals, promoting the idea of integration and representation of traditional healing organisations in addressing this pandemic. *"In our country, especially in the case of AIDS, I think they are playing an important role, very. Together with the hospitals, I think the tradition must get into the hospital and work in the, with the hospitals, they must be part of the health situation".* She supports the idea of organisations for traditional healers: "*There must be an organisation for traditional healers, it is good, they must be registered, they must be part and parcel of this thing"* and draws inspiration from the publicity gained by the Minister of Health's focus on the role of traditional healers in this regard. Tumi also sees the role of training in primary health care and community nursing as an important one as part of a bright future for traditional healers in South Africa who do the important work of

helping people: *"For myself, this country, I see a bright future, by helping people, I think I must do the job, because I went to the thwasa, you know, so I must do that job of helping people".*

The opportunity for social interaction and communication with others is a primary factor in work enjoyment for Tumi, who gives advice and traditional treatment to patients and colleagues in the clinic where she works. As a traditional healer, people respect her advice, which she often provides without elicitation. She feels that this part of her work as a nurse is similar to that of the traditional healer as they both heal with sick people. In identifying what she enjoys most about her work, Tumi states: *"The community by far, communicating with the people, you tell people what they must do, they do it. Remember, you are a traditional healer by that time. They do take this advice a lot. It is similar, I am helping people and there are sick people who are coming, even if you are a traditional, you get sick people. It's more than the same, when nursing; sick people.*

4.4.4. How others view the traditional healer

At work, Tumi feels accepted and understood in her traditional office by colleagues, collaboratively working with others, some of whom are also traditional healers. The doctors and community members are familiar with their work, using traditional medicine and asking for her advice on spiritual, emotional and interpersonal matters: *"The people I work with they also understand what I do because we are many, I think we are four or five traditional healers in the same clinic, so we are not having problems about these things, they understand, all the people. The doctors, they also understand ".*

Tumi does not experience conflict between the role of nurse and traditional healer. She is the nurse who wears a uniform when going to work in the hospital and is just as easily identified in the community by her traditional healer's attire when not at work, approvingly stating that it is becoming increasingly more common to find traditional healers in the field of nursing: *"As a nurse we are wearing a uniform, but at any stage you are a traditional healer. I think that there is no different, because people know. If you are going to work, you are a nurse, if you come back, wearing you traditional, they know you are a traditional healer. They go together, I think there are more nurses becoming traditional healers. It is good for them to do nursing, I can appreciate it if the traditional can do something like that"*.

She practices traditional healing on a daily basis when on leave or returning from work, giving advice and providing muti to the sick when not digging for herbs in the local area or in the mountainous regions of Swaziland. Colleagues and patients alike consult her at work and home: *"It's okay for me, they are not traditional healers, they understand a lot and they come to me for advice. They come asking for advice. I have to go to the homes to do this, not even after work. If they sick, they do come, I give them muti".*

4.5. Lerato's Story

4.5.1. Perceptions of being a traditional healer

Lerato describes herself as *"just like any other person"* preceding her initiation, recognising her calling in confused absentmindedness and illness for which there was no viable medical explanation, accompanied by dreams of her 'bones' which she interpreted as symbolic of her ancestral calling. She shares this ancestral office with her grandfather who was a traditional healer and encouraged her to follow her calling, being a *'keeper of bones'* in collecting objects of symbolic value she found until the time of her initiation.

She received training in first aid and home-nursing was followed by commercial education at tertiary level. Here Lerato shares the understanding of Feziwe by interpreting academic failure as indicative of ancestral disapproval at not heeding her calling, a belief which was supported by her grandfather who urged her to avail herself for traditional initiation: *"My grandfather said: "No, you know what, you're supposed to do these things, if you don't do these things, you won't manage to get anything ".*

Initially Lerato was resistant to the idea of initiation as she considered herself to be too young for such a responsibility but she acquiesced when social and family relations disintegrated, particularly following abandonment by the father of her two children. The issue of unemployment was also compounded by an experience of racial discrimination in being wrongfully accused of having stolen teaspoons from an employee only two weeks after commencing work. This was followed by her grandfather taking her to a teacher. She remembers this date as a distinct event marking the completion of her initiation as well as obtaining gainful employment.

Lerato recalls feelings of incompetence when she started to work as a nurse at a retirement village. She responded with committed learning effort, and continues to work towards obtaining further qualifications in her field. Lerato recalls receiving confirmation of her current employment in the hospital on dreaming of her deceased grandfather who then allowed her to fulfil her wish of nursing in return for heeding his calling to initiation: ***"****The first day after I'm done, being qualified to be a traditional healer, I had a dream, and then my grandfather said to me: "you are going to work" and I saw like, you know the hospital beds. Because you have allowed me to come to you, and to perform my job, you are going to work in the hospital****"***

For Lerato the process of initiation has been accompanied by ongoing changes in the way she sees herself and her lifestyle as traditional healer: *"I think you are changing all the time".* She led an active social life prior to becoming a Sangoma, where this was replaced by feelings of responsibility toward sick members of the community and increased observation of cultural taboos and ancestral rites. *"Before I became a traditional healer, you know with kids, we like having boyfriends, playing, doing everything, and then, if you turn to be a Sangoma, you need to change everything…you can't go to play because you are having somebody sick in the house".*

As a practicing traditional healer, Lerato keeps a register of patients' details and treatment for future inquiry and verification of treatment, stating that she enjoys having knowledge of treatment gained through initiatory practice and ancestral instruction in addition to western approaches to healing. *"I keep the register, they must give the card, you must go to the clinic first",* particularly as it relates to HIV: ***"*** *if they are HIV, and then I do ask them: "are you, have you been tested?" and then they will say "no", and then that person, that time, you can see that he's terminally ill. And then you do ask them: "are you? Have you tested?", and then they will say "no", and now, like me, I used to tell them: "please, I want you to be open for me, because I'm a nurse and then you must go and test so that when I give you something, I must know that where it's, going to lead you, cause I can't just give you everything and say 'drink', and then you don't feel better. If they give you medicine in the hospital, then you must also take to mind some of them so that they must work together, and then maybe you can be okay".*

4.5.2. Perceptions of working in a hospital environment

Lerato is forty three years old and resides in Gauteng Township from where she commutes daily to the hospital where she works as a nurse. Her desire to become a teacher was prevented by a lack of grades and contributed to her choice of nursing.

Lerato recalls a particular event which led to a direct interest in pursuing a career in nursing where she came upon an accident and had to assist the injured as first person on the scene. Although able to help to some degree, she felt limited by a lack of medical knowledge, which facilitated the choice of nursing in order to *"really"* help people.

Lerato: "I've been working here since 1996, maybe ten years in the field now. I'm a qualified, enrolled nurse but next year I'm going back to school again, to be a nursing sister". Learning and studying are important aspects of Lerato's account of her work in the hospital, emphasising that she had to complete matric (grade twelve) and pass her exams in community nursing before working as a nurse. In the hospital her experience of work has further been characterised by continued training and improvement, fuelled by a consistent desire for promotion and personal improvement as reflected in her words: ***"****A nursing sister. All the responsibility's going to be on your shoulder because now I'm still under somebody's control, if I'm doing anything I need to be assist, before I can do that. I now need to have the responsibility, of everything. When I do my course, I will become a sister in charge like that and decide what to do".*

An average day at work sees Lerato working twelve hour shifts which start at 07h00 *(seven AM)* with patient observation, feedings and change of dressings. At work she describes her role as that of the mother to children in the hospital, one who has to give medication and check fevers in addition to normal mothering responsibilities. This work follows a strict regime which involves regular reporting to the doctors and sisters in charge, a position Lerato aspires to achieve through continued learning as it will allow her to tell others what to do and to work more closely with the doctors.

On starting her work in the hospital Lerato recalls how she was not required to know everything but was trained in service whilst working with a *"real patient"* as opposed to the doll on which they practiced at college. She emphasises the need for precision in observing her daily duties in nursing routine at the hospital where one works with real

patients. She enjoys teaching younger staff as much as learning about new things in her area and ambitiously follows her goal of becoming a matron one day.

At times this work is also an experience of pain and loss at the death of a child, identified as the greatest challenge in her work as a nurse; something she shares with other colleagues: *" the child was operated and died, they just switched off the machine…and then she's dead and we just screaming, all of us, screaming, because we did like that child…that's the hard part of this work, if a child dies. It's not easy ".*

In an attempt to cope with ongoing and differing levels of emotional investment and pain, Lerato tells herself to *'delete'* these memories in order to attend to the next case. Although these situations present difficulties in the workplace, Lerato speaks encouragingly of being able to help staff and patients in cases where others cannot, not only as a traditional healer but also as one who can speak Shangaan and other languages, so communicating with more patients in ensuring correct treatment for sick children.

In looking toward the future, Lerato reflects an ambitious desire to further her *(formal)* education and achievements in the field of nursing. The next level of promotion is that of a Nursing Sister, for which she is currently training. In similarity to the work and qualification of Tumi, she will then hold a recognised qualification in community nursing which also involves training in psychiatric nursing and midwifery, enabling her to work more independently and to take increased responsibility where she currently requires assistance.

4.5.3. Perceptions of the relationship between work and traditional healing

"*I'm helping so many people. Mostly I specialise with kids who are very sick. I know how to help people, treat kids by giving them traditional medicine. I think it's nice to be a traditional healer, I think the kind of healing I do is close to my work in the hospital."*
What she enjoys most about her work is the opportunity to help children. As a nurse she can use her knowledge to help parents in the community by advising them in accordance with traditional practices following western based intervention and a doctor's examination or diagnosis, and as a traditional healer she is able to provide comfort and spiritual advice to parents when their child's condition has become incurable or terminal,

directing them to other traditional healers, as she does not identify herself clearly as such in the hospital environment. Lerato believes that it helps being a traditional healer in her work in the hospital as she *"can see what others cannot see"* and so provide comfort to parents of sick children.

For Lerato there is no perceived difference between herself and her colleagues, instead she identifies a difference in *her approach* to nursing: *"I don't see any different, we're working as the same here. But, the way we are working, we are not the same and even the feelings; we are not even the same".* Although Lerato is reticent about exposing her identity as a traditional healer toward staff in the hospital, she displays less reserve when communicating directly with parents on ancestral prompting, where she may include detailed instructions as per traditional cure and rites.

If she could choose, Lerato would practice full time traditional healing as this would afford her more time in consulting the continuous stream of patients at home. She emphasises that she must be available to heal when needed as a traditional healer. In working twelve hour shifts at the hospital, she becomes fatigued by continuous practice and work. The office of traditional healer compels her to see to the needs of community members at all times. As a traditional healer, she enjoys being able to heal others with her knowledge of both traditional and modern medical systems, believing that she can attend more comprehensively to their needs in working with other healers and medical professionals: "*I would be interested in working with other traditional healers also we working together, because, if you can't work together, we will never help each other, I think if it, we can just come together and work as a team, a team of doctors, a team of nurses, a team of traditional healers, and then maybe we can just be a team, we can help each other because some of the diseases, you can see that…eh-eh…this disease, it needs a hospital, this needs a traditional healer, you can be helped. It does help being a traditional healer because I can see what someone other cannot see".*

For Lerato, the future of traditional healing relates to co-operative intervention around HIV/AIDS with a focus on youth. Drawing strongly on her western medical position as a nurse, she emphasises the need for training and education of traditional healers in South Africa and supports the idea of recognised registration at national traditional healer's organisations: *"I think we have to work (with) each other, so that we can help, especially*

the growing up children, need to work (with) each other so that we can help them…because some of the, they don't know like this…pandemic HIV, they don't know it. you need to sit down with them and then tell them everything…they need some, most of them those who are not educated, need that education, so that, we must just push them, especially we, we who are educated just a little bit, we need to tell them, so that they must just, if people come, was, sometimes like me, they used to come to me".

Lerato is a member of THOSA (Traditional Healer's Organisation of South Africa) and holds a certificate of registration which allows her to dig for traditional medicine without being arrested for illegal digging. In making reference to legal representation services, she also indicates a feeling of safety in belonging to an organisation which has the power to protect her legally if a patient dies or she is sued: ***"****Other Sangomas, you teach them, you teach them. They do listen, and then you get certificate, traditional healers, it is, traditional healer's organisation, they do give us certificate and then they do give us even the card, that you must produce when you go dig the medicine, maybe somebody can come to you and die, and then those people they can sue you, and then you know that "I've got a place to go" so that you know that they can come, have got, they've got some lawyers, it's just a membership".*

As a nurse, she insists that all clients who come to her for treatment have already been to the clinic or obtained a diagnosis from a doctor before agreeing to treat them, even insisting on them producing their cards to prove that they have been to the clinic and particularly with regards to the suspicion of HIV/AIDS in response to ineffective muti treatment. This also allows her an opportunity to inform the community of safer health care practices.

As a traditional healer, she does not provide her services at any particular rate and often a simple "thank you" or fifty rand has to suffice as compensation for her efforts. As with Feziwe, Lerato makes reference to the current South African Minister of Health in promoting an awareness of local traditional healing practices and emphasises the need for traditional healers to work together with each other as well as to draw from western health care professionals in treating disease and fighting HIV/AIDS.

Inconsistency in regular clientele prevents Lerato from practicing full time traditional healing as she has two children and constantly needs money. The needs of her two sons who want to open their own *IT* Company are a primary motivating factor in retaining her employment as a nurse. Lerato repeatedly expresses an interest in working with other traditional healers, pointing out that they do gather at times of traditional ceremonies and initiation and draw from each other's knowledge in healing and referral of clients.

4.5.4. How others view the traditional healer

Although Lerato does not feel free to identify herself as a traditional healer at work she implicitly communicates this to colleagues. Although reticent about advertising the fact that she is a traditional healer, Lerato does help some colleagues who come to her for advice or medical complaints: ***"****The people I'm working with, they do know. They do not come for me when they need help, no, they didn't come. You know some people, they just think, maybe, maybe because I didn't wear those beads, you know, and then, because in our tradition you don't wear these beads".* She works with another traditional healer (of Nguni culture) who wears the distinctive red and white beads of a traditional healer but has not spoken to her more than confirming this office. She does not relate to her very closely as she is a "clerk" and Lerato a traditional healer within Northern-Sotho tradition, who does not wear her attire without participating in traditional affairs as Inyanga.

4.6. Tala's Story

4.6.1. Perceptions of being a traditional healer

For Tala the story of initiation started when she was twenty years old and had just graduated as a dental nurse. She describes how she *loved* her uniform of powder blue and white whilst working for a successful dentist in a prominent location. Initiation started with the appearance of a man dressed in the traditional attire of a Sangoma, whilst she was at work or home, interrupting her flow of thought, which was interpreted as an ancestral calling to serve as a traditional healer. Fear of being perceived as "mad", she did not inform doctors of these visions but instead inquired from the secretary, who indeed perceived her to be mad. When the appearance of this figure continued at home, Tala told her mother, who reassured her that this is a normal part of their family heritage, as her mother was also a traditional healer.

In response to this confirmation, Tala resisted the idea of traditional initiation and subsequently fell ill, unable to eat anything. Her grandfather then warned her that she could die if she did not comply with ancestral demand. Through fear of impending disaster or death, Tala availed herself for initiation at Lesotho, as per ancestral dream instruction, later confirmed by another traditional healer through a traditional rite of inquiry. Finally, significant weight loss saw her accept the calling and commence initiatory training under her teacher.

Tala relates the experience of initiation in a very animated and excited manner, telling a story of living in mountainous caves where she had more dream-based instruction and guidance towards her future teacher who then trained her in Lesotho. Here she received her ancestral name and upon completing her training, she returned to Soweto a qualified traditional healer.

She currently practices as a Sangoma and primarily uses herbal treatments in curing the ill. Interestingly, Tala does not remain strictly bound to African traditional practice, but also integrates some Western and Eastern approaches into her healing activities. In addition to extensive use of European herbs, she also practices Reiki, an eastern based form of healing, teaching this to other traditional healers and colleagues at work. Much of her work in the community focuses on the needs of the elderly, involving regular house calls and body massage in treating aches and arthritic pains as members of the community frequently call on her abilities to heal.

Although her ancestors disapprove of a nursing uniform, Tala still loves to work with people and enjoys her work as a medical receptionist as she is able to look after her doctor and help his patients to heal faster by assisting with herbal treatment in conjunction with western medicine. In providing herbal remedies, she takes great care not to interfere with the doctor's instructions and takes pleasure in showing that she understands some medical procedures, using western terminology in her descriptions. As a very busy woman, Tala states that her treatment is much sought after by community members who are not deterred by unfamiliarity with her combination of traditional and modern treatment: *"The people here they love it, especially the old people. They don't know it"*.

For Tala the changes in her life due to initiation are less pronounced as she has been practicing as a traditional healer for twenty three years and is still enjoying it very much. The identity of herself as traditional healer is well established and congruent with perceptions of her family heritage as her mother and grandfather were also traditional healers. On reflection, she does recall her initial resistance at the age of twenty, when she worked as a dental nurse and did not welcome ancestral disapproval of her nursing attire which she took much pride in wearing: *Tala: "I remember my powder blue and white uniform" "I was wearing my uniform, you know, it was something, that, you were special".* Now she wears her traditional attire made of sacrificial cow hide decorated with beads at traditional rites and ceremonies.

"I'm a Gobela, yes, yes I am, I'm a Gogo in fact, because my students have, children, now I'm not a Gobela anymore, I'm Gogo, granny". Tala relates to her office as 'Gogo', a spiritual grandmother, with much investment and tells how she has trained many people. She distinguishes this from a *Gobela,* who is a teacher instead of a 'grandmother' teacher. In addition to this, she runs her own catering business, specialising in traditional meals at wedding events and also sings in the gospel choir at the local church, of which she is a member, here Tala shares the Christian influence on traditional practice with Naledi. In leading a busy lifestyle, Tala takes pride in using her traditional (ancestral) name, a role she readily embraces as a busy woman who touches many lives as she continues to learn more about healing: *"My name, means 'people talk about me too much'. I am a busy woman, I touch many lives, I do".*

Tala expresses a clear desire for opening her own clinic, from where she could practice and teach traditional forms of healing on a full time basis, both with other traditional healers and with community members. A contributing factor to this wish is the constant demand for her traditional healing services both at work and home.

Her brother shares this calling with her but, as a successful engineer, he chooses to face occasional ill fate instead of enduring the hardships of initiation or exchange a financially lucrative career for the less prosperous lifestyle of a traditional healer.

Along a more entrepreneurial vein, Tala wants to promote and provide training in her eastern and western based practice to other traditional healers as she has integrated these different approaches successfully at work in the hospital environment in treating patients and instructing colleagues.

4.6.2. Perceptions of working in a hospital environment

Although living in a township, Tala works in a modernised private hospital with a team of medical professionals such as surgeons, gynaecologists, physicians, paediatricians and dieticians. She speaks of a benevolent employer of her grandmother who provided her with the means to a good education and a formal qualification in dental nursing, followed by encouraging exposure and participation in other forms of alternative healing, which she enthusiastically integrates into her traditional healing practice.

"Working here, as you see, no-one pass my door, no-one, they always greet me, even if they didn't have anything to ask, but they will come from the gate, if you ask, where is Tala, they will bring you here, so I like working with people, talking, and you see the other one only phone here for advice, you know, I like talking". Tala enjoys her work at the hospital where everyone who passes her open door greets and talks to her as a family member, where she looks after the doctor whom she serves as receptionist, ensuring he is paid and his patients taken care of, surgical procedures 'booked' and approval obtained from the medical aid. She speaks of a close relationship with her employer and takes responsibility for personal and work related arrangements (duties) on a daily basis. She relates enthusiastically how: *"he'll phone me when, even when I'm off: "what are we doing tomorrow? I've forgotten, how many patients do we have? ...so he'll phone me from home, because I know, maybe I'm clever, because I know everything!"*

4.6.3. Perceptions of the relationship between work and traditional healing

For Tala, who has been at this hospital for several years, there is no conflict between her occupational role and that of a traditional healer at work, where she regularly provides advice and herbal remedies for ailments and complaints to her colleagues and to patients treated by the doctor she works for. Relating to each other as family members, a colleague expresses her desire that Tala should never leave her current place of employment where she has happily worked for the past decade as the only Sangoma at

the hospital. Tala's story reflects congruence between her work as traditional healer and that in the hospital.

In spite of an ardent desire to practice full time traditional healing at her own clinic, Tala cites her role of caregiver and provider, both to her own children and her sister's, as reason for retaining her employment as receptionist at the hospital. Although not affluent, she tells of rewarding support in return for her efforts on behalf of her children and six others who live under her care.

Tala believes that it helps her to be a traditional healer in the work that she does as traditional healing may be more appropriate for some illnesses than others. She provides herbal remedies to patients whilst instructing them to complete the doctor's treatment at the same time as her treatment, which primarily aims at speeding up the healing process. She believes that in training other traditional healers, they can be included in a multidisciplinary approach to health care and provide more widespread healthcare services to the community: *"We can work with the doctors, because there are some sickness, they taking time to be healed, under medical, there's other sickness that can help quickly, but I don't stop them from that. I say they must use my herb, and the doctor's medicine, and the doctor will discharge her, so I work hand to hand with them"*.

In promoting cooperation between traditional healers and doctors, Tala emphasises similarities between traditional and bio-medical approaches in her treatment of wounds and common physical ailments: *"they go together these things, we do treatment of wounds, and, the doctors do treatment of wounds, so we have to open it, and clean it…so you have to know these things…you see, that's why I teaching others also, they must know these things. That's why I wanted to open a, workshop, something like that, to get a few traditional healers, to know about health".*

4.6.4. How others view the traditional healer

Tala treats patients both at work and at home. In assisting some patients who are being treated by the surgeon for whom she works, she waits for their confirmation of her treatment until they themselves tell the doctor that she has been helping them to heal faster. Others come to her house after seeing the doctor and she treats them according to the doctor's diagnosis whilst continuing with prescribed medication. She ascribes her

employer's acceptance of her traditional practice to her fulfilling her work responsibilities, which keeps him satisfied. *"To others, I will tell him, the others they don't want, they're shy, the patients, and then when I knock off, they come here. I give them…they drinking the tablet, but, for them to heal quickly, I give them the herbs. And then, doctor will see them heal quickly and discharge them…the others will say: "you know doctor, Tala has helped me, so I'm, so, I healed quickly", you see, because the wounds need to be cleaned also, he doesn't mind, I'm doing his job, I mean his job, I'm looking after the patient, I'm opening the file, the money's getting in and I've got time for my work. Because, if I was not doing his job, he will fight, so now I make sure he gets his money, the patients are looked after, I book theatre, I'm authorised and he'll phone me when, even when I'm off: I'm doing all those things".*

In response to the perceptions of others to her traditional practice at work, Tala states that: *"it works well, they understand, they know these things. I help them at work".* A female doctor who works with Tala speaks highly of her healing abilities, stating that she has personally benefited from Tala's herbal remedies and regularly asks her for advice on health matters, fondly relating to her as a family member: *"she must never go away, we are like family here".*

What Tala most enjoys about her work is the social interaction with all who pass her door: *"I like people, I like talking, I like helping"*. Being energetic and talkative, her work provides much opportunity for direct communication and personal contact. As a comforting presence, she has a very close relationship with her employer and his wife as well as several other colleagues at work, and is known throughout the premises as one who continuously assists colleagues with health complaints and advises them on personal matters. Unlike Feziwe, Tala does not wish to call herself a doctor but is happy with her identity as a traditional healer who can work efficiently in a hospital environment and contribute meaningfully in her working capacity.

Although Tala is generally happy at her workplace, she does experience some stress in obtaining medical aid authorisation, which is a delayed process, while a patient is awaiting surgical procedure in theatre and doctors grow impatient at diminishing anaesthetic effects.

Tala uses both her workplace and home as a basis for consultation, treating patients both in her own time and during quieter working hours. Tala feels that the experience she has gained in working in a hospital environment would be helpful in managing her own clinic in the future.

Tala wants to continue learning and practicing traditional and modern healing practices. She wants to impart these skills to other traditional healers as she believes that in improving their own condition, they will become more adept at healing: *"Because I love to working with people I'll do a training, in something that will help me to go through, like home nursing…because I sometimes get somebody with the wound. If you are traditional healer, I think you have to go for, eh, nursing, because how, how are you going to treat the wound? Because you have to put the gloves for safety, and then you have to touch there…so if you don't have gloves, you get infected, so, you have to have the gloves, the mask…so, I will go for training, that will put me nearer, you know, light, a conclusion of how to help people, even if its not under traditional only. To know about health, you must become healthy first, and then you can treat the patient".*